"Never doubt that a small group of committed people can change the world. Indeed it is the only thing that ever has."

- Margaret Mead

COMMUNITY ENHANCEMENT FUND FY14

MANAGING YOUR COMMUNITY ENHANCEMENT FUND (CEF) GRANT

"An awardee [organization] that runs its business side well runs its [program] side well."

-Karen Tiplady, Director Division of Grants and Agreements, National Science Foundation

Goals of Training

 Know what to expect regarding the contracting process

 Know what to expect regarding reporting and invoicing

 Know what to expect of CEF grant monitoring

Why Does It Take So *Long* Before I Can Get My Money??



CEF Process (remaining)

- Recipients provide DGC with required documentation.
- Upon receipt, DGC drafts the grant contract, and forwards it to the grantee for review, approval and Board Chair signature.
- Upon receipt of the signed contract from the grantee, DGC prepares the contract for Metro approvals, attaching a copy of the Application and any Amendments (which includes the completed Spending Plan).

The Contract must be signed by the Board Chair or Board President – not the Executive Director!



CEF Process (remaining)

- DGC forwards the contract to the <u>Director</u> of <u>Finance</u> for approval
- The Director of Finance reviews, signs and forwards contract to <u>Metro Legal</u>
- Metro Legal and <u>Risk Management</u> review, sign and sends contract to Metro Clerk for filing
- The Metro Clerk signs and files contract
- The DGC sends a .pdf copy of the fully executed contract to <u>the grantee</u>

CEF Process (remaining)

 The grantee submits invoice for payment to Metro Payment Services in accordance with the payment terms of the contract.

Average Number of Days to Get Contracts Executed

<u>Total</u> = 31 <u>Days</u>

- DGC creates contract* and sends to NPO for signature: 4 days
- NPO reviews, approves and gets Board Chair's signature and returns contract to DGC: 16 days
- DGC gets signed contract sent off for Metro approvals: 1 day
- Metro contract approvals process, through filing/execution by Metro Clerk: <u>9 days</u>
- DGC sends recipient a pdf'd copy of executed contract: 1 day

^{*}after DGC receives the information/materials needed to create it





Pre-Contract Documents

- Certifications of Assurance (all)
- Annual Report (or equivalent) (all)
- Recipient Contact Information Form (all)
- Amendments to Application (if applicable)
- Short Vendor Application (if new)
- ACH form (if new since FY10)

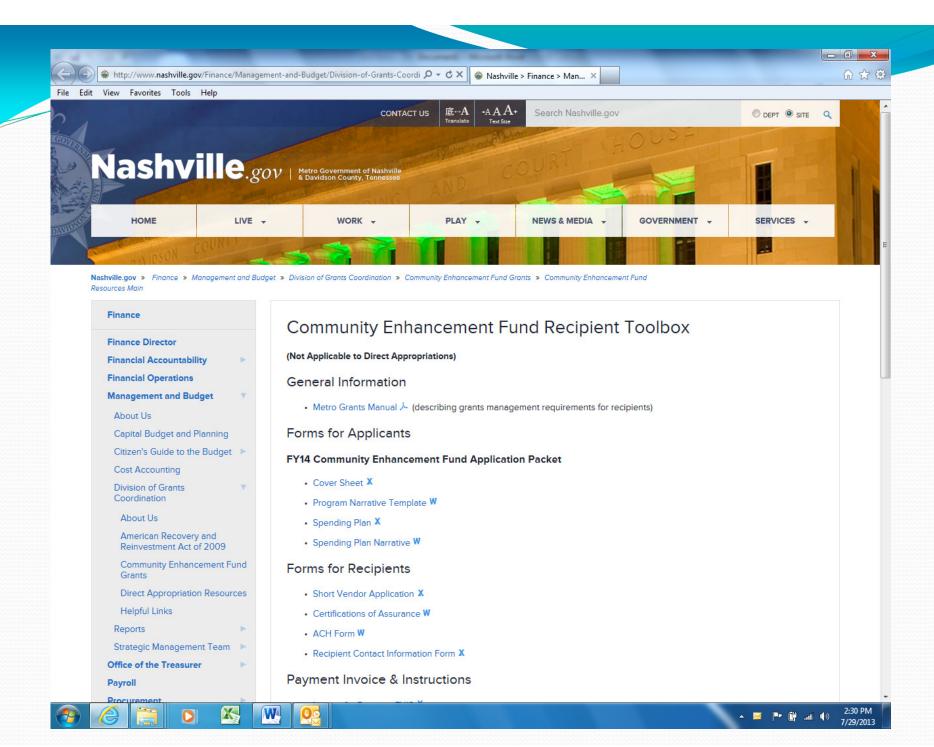
Post-Contract Documents

- Invoice for Payment
- Spending Plan Revision Letter (if needed)
- Revised Spending Plan Form (if needed)
- Interim Program Report
- Final Program Report
- Annual Expenditure Report

Website Address:

http://www.nashville.gov/Finance/Management-and-Budget/Division-of-Grants-Coordination/Community-Enhancement-Fund-Grants-/Community-Enhancement-Fund-Resources-Main.aspx

(Be sure to check out the <u>Recipient Tool Box</u> for your forms and helpful resources such as Grants Monitoring Manual and OMB Circulars)



INVOICING

Invoicing

- Once you receive executed contract, you may begin invoicing.
- Expenses must be incurred within contract period 7/1/13 - 6/30/14
- Payment terms are listed in contract:
 - Payments for awards of less than \$100,000 will be made quarterly on a cost <u>reimbursement</u> basis
 - Payments for awards of \$100,000 or more will be made monthly on a cost <u>reimbursement</u> basis

I certify to the best of my knowledge and belief that the above is correct and the amount invoiced is in accordance with the contract conditions and that payment is due and has not been previously paid.

Title

RECIPIENT'S AUTHORIZED SIGNATURE

Name

METROPOLITAN GOVERNMENT OF NASHVILLE AND DAVIDSON COUNTY INVOICE FOR PAYMENT

Mail to: METRO PAYMENT SERVICES P.O. BOX 196301 Nashville, TN 37219-6301

NAME OF RECIPIENT:		INVOICE DATE:	(No Back-Dating)	
ADDRESS:		FOR THE PERIOD(S):		
ADDRESS:		CONTRACT PERIOD:	AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA	
ADDRESS :		CONTRACT #:	<u>-</u>	
		CONTACT PERSON:	AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA	
FEDERAL ID #:		TELEPHONE #:		
		EMAIL ADDRESS:		
COST CATEGORIES	TOTAL CONTRACT SPENDING PLAN (note: any changes to the contract Spending Plan must be first approved by DGC)	THIS PERIOD'S IN	VOICE AMOUNT	COMMENTS
Salaries and Wages	**************************************	~~~~	AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA	
Benefits and Taxes			AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA	***************************************
Total Personnel	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA	**************************************
Professional Fees			A/AA/AAA/AAAAAAAAAAAAAAAAAAAAAAAAAAAAA	10000000000000000000000000000000000000
Supplies	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		A/AA/AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA	AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA
Communications	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		A/1AA/AAA/AAAAAAAAAAAAAAAAAAAAAAAAAAAA	AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA
Postage and Shipping				
Occupancy				
Equipment Rental and Maintenance				
Printing and Publications				
Travel/Conferences and Meetings				
Insurance				
Specific Assistance to Individuals				
Other Non-Personnel				
Total Nonpersonnel				
TOTAL				
······································			AAAAAAAAAAAAAAAAAAAAAA	······································

Date

METROPOLITAN GOVERNMENT OF NASHVILLE AND DAVIDSON COUNTY INVOICE FOR PAYMENT

Mail to: METRO PAYMENT SERVICES P.O. BOX 196301 Nashville, TN 37219-6301

NAME OF RECIPIENT :	ABC Agency	INVOICE DATE:	AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA	
ADDRESS :	123 Maple Street	FOR THE PERIOD(S):	AAAAAAAAAAAAAAAAAAAAAAAAAAA	
ADDRESS :	Suite 456	CONTRACT PERIOD:	From (07/01/2013 to 06/30/2014
ADDRESS:	Nashville, TN 37201	CONTRACT #:	A/A/A/A/A/A/A/A/A/A/A/A/A/A/A/A/A/A/A/	L-3456
		CONTACT PERSON:	John Q. F	Public - Finance Manager
FEDERAL ID #:		TELEPHONE #:	A/VA/VA/A/A/A/A/A/A/A/A/A/A/A/A/A/A/A/A	(615) 123 - 1234
		EMAIL ADDRESS:	jpubl	ic @ abcagency.org
	TOTAL CONTRACT SPENDING PLAN			
	(note: any changes to the contract			
	Spending Plan must be first approved			
COST CATEGORIES	by DGC)	THIS PERIOD'S INV	OICE AMOUNT	COMMENTS
Salaries and Wages	\$5,000.00		\$1,250.00	
Benefits and Taxes	\$2,000.00	\$500.00		
Total Personnel	\$7,000.00	\$1,750.00		
Professional Fees	\$1,000.00	\$250.00		
Supplies	\$800.00	\$200.00		
Communications	\$500.00	\$125.00		
Postage and Shipping	\$200.00	\$50.00		
Occupancy				
Equipment Rental and Maintenance				
Printing and Publications	\$500.00	\$125.00		
Travel/Conferences and Meetings				
Insurance				
Specific Assistance to Individuals	\$10,000.00	\$2,500.00		
Other Non-Personnel	\$2,000.00	\$500.00		
Total Nonpersonnel				
	\$15,000.00		\$3,750.00	
TOTAL				
	\$22,000.00		\$5,500.00	^^^^^^^^^^^^^^^^

I certify to the best of my knowledge and belief that the above is correct and the amount invoiced is in accordance with the contract conditions and that payment is due and has not been previously paid.

RECIPIENT'S AUTHORIZED SIGNATURE

Name	Title	Date

METROPOLITAN GOVERNMENT OF NASHVILLE AND DAVIDSON COUNTY INVOICE FOR PAYMENT

Mail to: METRO PAYMENT SERVICES P.O. BOX 196301 Nashville, TN 37219-6301

NAME OF RECIPIENT:	ABC Agency	INVOICE DATE:		SEPT 12, 2013	
ADDRESS :	123 Maple Street	FOR THE PERIOD(S):		1st - Sept 30th, 2013	
ADDRESS:	Suite 456	CONTRACT PERIOD:			
ADDRESS:	Nashville, TN 37201	CONTRACT #:		L-3456	
//////////////////////////////////////		CONTACT PERSON:	John Q. P	ublic - Finance Manager	
FEDERAL ID #:		TELEPHONE #:		(615) 123 - 1234	
		EMAIL ADDRESS:	jpubl	ic @ abcagency.org	
	TOTAL CONTRACT SPENDING PLAN				
	(note: any changes to the contract				
	Spending Plan must be first approved				
COST CATEGORIES	by DGC)	THIS PERIOD'S INV	OICE AMOUNT	COMMENTS	
Salaries and Wages	\$5,000.00	\$1,250.00			
Benefits and Taxes	\$2,000.00	\$500.00			
Total Personnel	\$7,000.00	\$1,750.00			
Professional Fees	\$1,000.00	\$250.00			
Supplies	\$800.00	\$200.00			
Communications	\$500.00	\$125.00			
Postage and Shipping	\$200.00	\$50.00			
Occupancy					
Equipment Rental and Maintenance					
Printing and Publications	\$500.00		\$125.00		
Travel/Conferences and Meetings					
Insurance					
Specific Assistance to Individuals	\$10,000.00	\$2,500.00			
Other Non-Personnel	\$2,000.00	\$500.00			
Total Nonpersonnel					
	\$15,000.00		\$3,750.00		
TOTAL			\A\A\A\A\A\A\A\A\A\A\A\A\A\A\A\A\A\A\A		
	\$22,000.00	AAAAAAAAAAAAAAAAAAAAAAAAAAAAA	\$5,500.00	^^^^^^^^^^^^^^^^^	

I certify to the best of my knowledge and belief that the above is correct and the amount invoiced is in accordance with the contract conditions and that payment is due and has not been previously paid.

RECIPIENT'S AUTHORIZED SIGNATURE

Anne Anderson President - ABC Agency Nov. 8, 2013

Name Title Date

METROPOLITAN GOVERNMENT OF NASHVILLE AND DAVIDSON COUNTY INVOICE FOR PAYMENT

Mail to: METRO PAYMENT SERVICES P.O. BOX 196301 Nashville, TN 37219-6301

NAME OF RECIPIENT:	ABC Agency	INVOICE DATE:		NOV 8, 2013
ADDRESS :	123 Maple Street	FOR THE PERIOD(S):	July	1st - Sept 30th, 2013
ADDRESS:	Suite 456	CONTRACT PERIOD: From 07/01/2013 to 06/3		07/01/2013 to 06/30/2014
ADDRESS:	Nashville, TN 37201	CONTRACT #:	AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA	L-3456
//////////////////////////////////////		CONTACT PERSON:	John Q. P	Public - Finance Manager
FEDERAL ID #:		TELEPHONE # : (615) 123 - 1234		(615) 123 - 1234
		EMAIL ADDRESS:	jpubl	ic @ abcagency.org
	TOTAL CONTRACT SPENDING PLAN (note: any changes to the contract Spending Plan must be first approved			
COST CATEGORIES	by DGC)	THIS PERIOD'S INV	OICE AMOUNT	COMMENTS
Salaries and Wages	\$5,000.00	\$1,250.00		
Benefits and Taxes	\$2,000.00	\$500.00		AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA
Total Personnel	\$7,000.00	\$1,750.00		
Professional Fees	\$1,000.00	\$250.00		^^^^^^
Supplies	\$800.00	\$200.00		AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA
Communications	\$500.00	\$125.00		^^^^^^^
Postage and Shipping	\$200.00	\$50.00		^^^^^
Occupancy				
Equipment Rental and Maintenance				
Printing and Publications	\$500.00		\$125.00	
Travel/Conferences and Meetings				
Insurance				
Specific Assistance to Individuals	\$10,000.00	\$2,500.00		
Other Non-Personnel	\$2,000.00	\$500.00		
Total Nonpersonnel				
	\$15,000.00		\$3,750.00	
TOTAL				
	\$22,000.00		\$5,500.00	

I certify to the best of my knowledge and belief that the above is correct and the amount invoiced is in accordance with the contract conditions and that payment is due and has not been previously paid.

RECIPIENT'S AUTHORIZED SIGNATURE

Anne Anderson President - ABC Agency Nov. 8, 2013

Name Title Date

Invoicing

 Invoice Form and Instructions found on DGC's CEF website "Recipient Toolbox"

http://www.nashville.gov/Finance/Management-and-Budget/Division-of-Grants-Coordination/Community-Enhancement-Fund-Grants-/Community-Enhancement-Fund-Resources-Main.aspx

Greg McClarin 862-6509 greg.mcclarin@nashville.gov

CEF Grant Reporting

CEF Required Reports

- Interim Program Report
 Due middle of February
- Final Program Report
 Due 45 days after the end of the grant period
- Annual Expenditure Report
 Due 45 days after the end of the grant period

Interim Program Report

- Comparison of actual activities and accomplishments (your outcomes) with those established for the period in your contract's Scope of Program
- Reasons why established goals were not met, if applicable
- Planned steps for getting back on target

Interim Program Report (cont.)

- Collaboration with other agencies
- Other pertinent information including, when appropriate, analysis and explanation of cost overruns or high unit costs, significant staff changes, etc.

Final Program Report

This is similar to the Interim Program Report, but this reports asks you to talk about the entire grant period.

Annual Expenditure Report

Refer to your Spending Plan when completing this form

METROPOL	ITAN GOVERNM	MENT OF NAS	HVILLE AND DA	VIDSON COUNTY
	*****	AL EXPENDITURE		
NAME			CONTRACT #:	
ADDRESS			START DATE:	
CITY, STATE & ZIP		AAAAAAAAAAAAAA	END DATE:	
			CONTACT PERSON	
FEDERAL ID #		AAAAAAAAAAAAA	CONTACT TELEPHON	NE(615)
	TOTAL METRO	TOTAL ACTUAL	FOR OFFICE USE	
	CONTRACT	EXPENDITURES		
	SPENDING PLAN (OR	OF METRO	VARIANCE ACTUAL	
COST CATEGORIES	DGC APPROVED	FUNDS FOR THE	TO BUDGET	COMMENTS
Salaries and Wages		444444444444		
Benefits and Taxes		2222222222222	0/1/2/1/2/1/2/2/2/2/2/2/2/2/2/2/2/2/2/2/	
Total Personnel Expenses				
Professional Fees	0.	AAAAAAAAAAAAA	4444444444444444	
Supplies		AAAAAAAAAAAAAAA	AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA	A-000000000000000000000000000000000000
Communications	0.		^^^^^	A. AAAAAAAAAAAAAAAAAAAAAAAAA
Postage and Shipping				
Occupancy	0.			A
Equipment Rental and Maintenance				
Printing and Publications		~~~~~		
Travel/Conferences & Meetings		^^^^		
Insurance				
Specific Assistnace to Individuals		44444444444		A MAAAAAAAAAAAAAAAAAAAA
Other Non-Personnel				
Total Nonpersonnel			0.000,000,000,000,000,000	A.A.A.A.A.A.A.A.A.A.A.A.A.A.A.A.A.A.A.
TOTAL		^^^^	^^^^^	
I certify to the best of my kn Metro Grant.		he above represents	total expenditures incur	red for the purposes of the
RECIPIENT		DIVISION OF GRANTS COORDINATION		
AUTHORIZED SIGNATURE:		^^^^^	REVIEWER:	
TITLE	0.		TITLE	
DATE		1	DATE	//
NOTE: This repor	t is due, along with the F	inal Program Report	t, 45 calendar days after t	he contract end date
Please mail report to:	ase mail report to: Division of Grants Coordination, Metro Finance		ince	
ricuse man report to:	P.O. Box 196300	uniation, metro i ma	100	
	Nashville, TN 37219-63	00		
	0.000,000,000,000,000,000			
or deliver to:	700 2nd Avenue South,	Suite 201		Modified March 13, 2013
	Nashville, TN 37210			

How do you know what to report on????

Examine Your Contract"Scope of Program"



Report Examples

- 1. Briefly state all outcomes (quantifiable objectives) <u>from the Scope of Services in your CEF contract.</u>
 - a) Outcome: 45 clients will enroll in the program and 38 will complete it.
 - b) Outcome: 80% of clients completing the program will show increased understanding of the legal system.
 - c) Outcome: 80% of clients completing the program will report an increased feeling of safety.

- 2. State the status of the achievement of all those objectives as of December 31, 2013.
 - a) Status: 20 clients enrolled in the program and 19 completed it.
 - b) Status: 17 clients who completed the program (89%) increased their understanding of the legal system.
 - c) Status: 18 clients who completed the program (94%) reported an increased feeling of safety.

- 3. Briefly describe CEF-funded project activities and/or events held, and number of participants/clients/recipients.
 - 1. 15 Support Group meetings, average attendance 12
 - Individual counseling sessions 2 x monthly for 20 participants
 - 3. 19 Orders of Protection issued
 - 4. Transported clients to Court: 44 trips
 - 5. 23 socio-education presentations to community groups for approximately 300 attendees

- 4. What obstacles have you faced in meeting the goals and objectives of this program?
 - a) We did not get our Metro grant contract until September so got a late start, which is why our numbers are down.
 - b) We had flooding at our agency and did not have the use of our building for several weeks.
 - c) The volunteer who was developing our legal knowledge test instrument had medical problems that delayed her work.

5. What obstacles have you faced in complying with the CEF grant requirements?

Only being able to bill quarterly causes cash flow problems for us.

- 6. How are these obstacles being addressed (planned steps for getting back on target)?
 - a) We stepped up recruiting and have found another referral source so plan to make up our numbers in the second half of the year.
 - b) Flood damage has been repaired and we are back in our building. We were able to temporarily relocate our services with one of our partner agencies.

- c) We are using a "canned" legal knowledge test we got from the American Journal of Domestic Violence Studies to test client legal knowledge instead of the test that our volunteer was developing for us.
- d) We had to get a line of credit from the bank to deal with the cash flow problems from only being able to bill quarterly.

- 7. Describe your interactions with other agencies to effectively carry out this program...
 - General Sessions Court:
 - a) We get referrals from them
 - b) We provide services for their clients and they promote our services.
 - c) They let us use some of their space while we were getting the flood damage repaired.
 - d) No obstacles this period in our interaction.

- 7. Describe your interactions with other agencies to effectively carry out this program...
 - Metro Police
 - a) We get referrals from them, and MNPD staff do presentations to our groups.
 - b) We can assist their clients with services while they help give our clients information they need.
 - c) Key MNPD staff member retired, so we have had several meetings with the replacement to be sure we have a smooth transition.

8. Describe any significant changes in staff since the start of the fiscal year. How have such changes affected the program?

Our Program Director was out on maternity leave for 2 months and other staff had to fill in. We were still able to provide all the services included in our application by using volunteers to carry out transportation tasks.

- 9. Please describe anything else that has a bearing on the accomplishment of the program objectives or that would be useful for Metro to know (e.g., cost overruns, particular achievements, etc.)
 - Our transportation costs were higher than planned due to extra maintenance on our van; this was compensated for when we exceeded our bake sale goal by 70% so we did not have to reduce services.
 - Our Agency won the Center for Nonprofit Management Marvin Runyon Award

What NOT to Include!

 A rehash of the history, mission, and accomplishments of your agency from the "Agency Capacity" section of your application.



Community Enhancement Fund (CEF) FY14 Recipients

Non Profit Organization (NPO's)

Office of Financial Accountability (OFA)

- Inside Metro
 - Responsible for monitoring federal and state grants to Metro departments.
 - Responsible for monitoring departments procurements/purchases.
- Outside Metro
 - Responsible for approving audits of NPOs
 - Responsible for monitoring grantees that receive direct appropriations.

- Approval of Audits
 - Audit report is required to complete the application process.
 - Report must be the latest as of June 30.
 - Cannot be more than a year old.
 - Audit report must be prepared by a CPA in public practice.
 - Audit report must include an opinion on financial statements presented.

- Monitoring Grant Funds
 - Responsible for monitoring grantees that receive direct appropriations.
 - Our goal is to monitor ALL CEF appropriations.

Monitoring CEF Appropriations

- A monitoring review is substantially less in scope than an audit.
- The OFA does not audit financial statements.
- The OFA does not express an opinion on Financial Statements.
- Monitoring includes financial and program records.

OFA's Objective

- 1. Grantee's capacity to administer the grant
- 2. Grant objectives are being met
- 3. Reliability of internal controls
- 4. Allowability of costs (Grants Manual)
- 5. Compliance with contractual obligations
- 6. Reliability of financial and program reports

OFA Procedures

- Interview management including fiscal officer
- Review agency's operations and activities
- Review for compliance with the intended beneficiaries of the grant funds
- Review the financial stability of the agency
- Review controls and supporting documentation
- Review the accounting records

Required Documentation

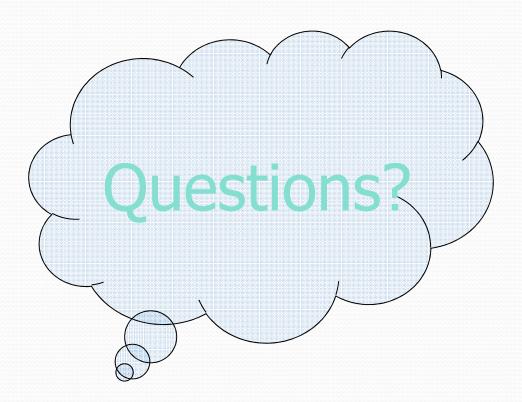
- Organization chart and overview of staff responsibilities
- Current Listing of Board of Directors
- Minutes of the Board of Directors meetings
- Chart of Accounts
- General Ledger
- Cash Disbursement Reports
- Cash Receipts Reports
- Supporting documentation for cost reported to Metro

Required Documentation

- Program and/or progress reports
- Supporting documentation for program accomplishments
- Internal policies and procedures manual
- Prior audit reports
- Any other information necessary which would support use of the grant funds

Review Process

- Entrance conference meeting
- Test documentation provided
- Follow up any missing records or questions
- Exit conference meeting
- Prepare monitoring report
- Issue/publish monitoring report



Question and Answer



Congratulations and Good Luck!

Questions throughout the season or if you would like to review your folder, please contact Dennise Meyers 880-2640 or dennise.meyers @nashville.gov